

GENERAL FACT SHEET

Fill-in form, tab to next field

BILL NUMBER 10R-130

BRIEF TITLE

APPROVED DEADLINE

REASON

Nebraska Department of Education

Grant Award Notification

DETAILS

POSITIONS/RECOMMENDATIONS

Grant Award Notification from the Nebraska Department of Education to the Lincoln-Lancaster County Health Department for \$21,250.00 for the Child Care Connection for Parents of Children with Special Needs. Term of Agreement - 5/1/10-9/30/11.	Sponsor	
	Program Departments, or Groups Affected	
	Applicants/Proponents	Applicant City Department Other
Discussion (Including Relationship to other Council Actions)	Opponents	Groups or Individuals Basis of Opposition
	Staff Recommendations	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

DETAILS
POLICY/PROGRAM IMPACT

	POLICY OR PROGRAM CHANGE	<input type="checkbox"/> NO <input type="checkbox"/> YES <hr/> <hr/> <hr/>
	OPERATIONAL IMPACT ASSESSMENT	<hr/> <hr/> <hr/>
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ COST of this Ordinance/Resolution \$
		RELATED annual operating Costs \$
		INCREASE REVENUE EXPECTED/YEAR \$
	SOURCE OF FUNDS	CITY [Approximately]
_____ \$ _____ %		
_____ \$ _____ %		
_____ \$ _____ %		
_____ \$ _____ %		
_____ \$ _____ %		
NON CITY [Approximately]		
_____ \$ _____ %		
_____ \$ _____ %		
_____ \$ _____ %		
BENEFIT COST <input type="checkbox"/> Front Foot Average Assessment <input type="checkbox"/> Square Foot \$ _____ \$ _____		

APPLICABLE DATES:

FACT SHEET PREPARED BY: Bruce D. Dart, Ph.D., Health Director

REVIEW BY:

REFERENCE NUMBER